SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number
Contact Number
EMail Address

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid

| | ACCIDENT STATEMENT |
|--|---|
| Date Of Report | 04/09/2018 10:16 |
| Date Of Accident | 31/08/2018 23:30 |
| Exact Location Of Accident | OPEN SPACE CAR PARK BLK 698 HOUGANG ST.61 |
| Country/State of Loss | SINGAPORE |
| - | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SKD5302U |
| Insured/Policyholder | |
| Name Of Registered Owner | MATHIVANAN S/O MUTHU |
| NRIC No | S6930577F |
| Email Address | MACMATHIVANAN@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-91665819 |
| Alternative Phone No | OTHERS-91665819 |
| Vehicle Particulars | |
| Manufacturer | HONDA |
| Model | CIVIC 1.8L A |
| Exact Purpose for which vehicle was being used at time of accident | PTE USE |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | REPORTING ONLY |
| Vehicle Category | PRIVATE CAR |
| Insurance Company | |
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | DMPCSN3047111800 |
| Cover Note Number | 13/07/18 - 12/07/19 |
| Driver | |
| Name of Driver | UMAH A/P S DHANAPALAN |
| Passport No/FIN | 870721055028 |
| Date Of Birth | 21/07/1987 |
| Occupation | INDOOR |
| Date Of Driving Pass | 08/07/2008 |
| Driving Experience | 10 YEARS AND 1 MONTH |
| Gender | FEMALE |
| | |

NOEMAIL

Address BLK 357 YISHUN RING RD #07-1846

Postcode 760357

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NO

2

NAME: : SISTER

: FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name

YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE

NO

Police Station Address ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY:

GENDER:

on Address SINGAPORE

Police Station Contact **TEL NO**: 1800-8529999 - **FAX NO**: 68522299

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACH & NOTICE OF COMPLIANCE.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJS2255A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

VEHICLE NO : SED DATE & TIME:

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- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

GIARMC SketchPlanform, V3

Date & Time: 4

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.

Sketch Plan #2 SIS 2255 A SKETCH PLAN DESCRIBE CIRCUMSTANCES OF THE ACCIDENT Note: Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information. DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Reporting Cerytre Personnel's Signature Driver's Signature (If driver is not the policyholder) Date & Time: 4[4][3 Name: Date & Time: 4/9 (45) NRIC/FIN No.:

() Claim Third Party () Reporting Only

GLASIME SKylishPlaniform V3 () Claim Own Policy

() Claim OD/TP at other workshop (

NOTICE OF COMPLIANCE

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Umah S Dhanapalan (h/p: 82575585)

NRIC/FIN: G7803890G of Block 357 Yishun Ring Road #07-1846 has reported to the Police a non-injury traffic accident

which occurred at Open Space carpark Block 698 Hougang St 61

on 31/08/2018 at 2330hrs am/pm involving the following vehicles:

- SKD5302U/Honda/White/Colour (Complainant's husband's (Mr Mathivanan S/O Muthu, (91665819) vehicle
- 2. SJS2255A/Kia/Balck Colour (Other party vehicle)
- 2 If this accident was reported to the Police within 24 hours of its occurrence.
 Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSI Andy Lucas

Date: 03/09/2018 Time: 1026hrs

S/D Ref: 34.

Police Post/Unit: Yishun North NPC

Original – to be issued to informant Duplicate – to be submitted to Traffic Police

CONFIDENTIAL

Version as of 15 Jan 2002

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$6930577F





MATHIVANAN S/O MUTHU

மதிவானன்

Country/Place of birth SINGAPORE

INDIAN Date of birth 26-08-1969

869**3057**7F



LESEN MEMANDU MALAYSIA



UMAH A/P S DHANAPALAN



MALAYSIA

870721055028

Ratas / Olean D

07/10/2016 - 21/07/2018





Lesen Memandu Malaysia

(Malaysian Driving Licence)

NO. K.P. 870721055028 HAL UNAH A/P S DHANAPALAN

Tempoh : 15/01/2013-14/06/2013 Kelas : D

Pass Date: 08/07/2008



DRIVING LICENCE MALAYSIA



UMAH A/P S DHANAPALAN



MALAYSIA 870721055028

07/08/2018 - 21/07/2020



5569459



S6930577F



03-03-2016

NRIC No. S6930577F Date: 18/05/2018

207043 B1b4pvtw



JEJLE

No SIRE AB 067222

NO. K.P. : 870721055028 MAL 108011 SALINAN

JPJL6

0101181 36EGsAHs













